

New Worker Orientation Checklist



All employees and dependent contractors operating under your company's safety plan must review the following general areas **on their first day before they start work or when returning to work after an absence of longer than 6 weeks.**

Employee / Contractor Name:

Kyle Prince

Date:

Aug 30/2021

Supervisor/H&S rep name:

Supervisor/H&S rep contact:

Company Policies									
<input checked="" type="checkbox"/> Cover Page - Forest Safety Accord	<input checked="" type="checkbox"/> Section 1- Company Health & Safety Program								
<input checked="" type="checkbox"/> Section 5- Job Roles and Responsibilities -	<input checked="" type="checkbox"/> Section 4- Safety Team members-								
Review of Safety Policies and Procedures									
<input checked="" type="checkbox"/> Section 6- Required safety meetings	<input checked="" type="checkbox"/> Section 7.2 - Hazard / close-call / incident reporting requirements and procedures								
<input checked="" type="checkbox"/> Section -5.1 Right to refuse work and report unsafe conditions	<input checked="" type="checkbox"/> Section 13 - Progressive discipline and violence in the workplace policies								
<input checked="" type="checkbox"/> Section 7- First Aid equipment and procedures	<input checked="" type="checkbox"/> Section 7.2.1 - Check-in procedures and field communications								
<input checked="" type="checkbox"/> Section 10- PPE policy and requirements	<input checked="" type="checkbox"/> Section 7.5 and Appendix 2 - Emergency Response Plan (ERP) and procedures								
<input checked="" type="checkbox"/> Section 7.2- Field Safety Plans	<input checked="" type="checkbox"/> Section 6.2 - Tailboard Meetings / <input checked="" type="checkbox"/> Section 8 Vehicle and Machinery Inspections/ <input checked="" type="checkbox"/> Section 9 Site and Worker Assessments								
<input checked="" type="checkbox"/> Section 6.1 - New Worker Orientations	<input checked="" type="checkbox"/> Section 7.1- Worksite First Aid Requirements								
<input checked="" type="checkbox"/> Section 11- WHMIS orientation and location of the Material Safety Data Sheets (MSDS)	<input checked="" type="checkbox"/> Section 12- Records of Training								
<input checked="" type="checkbox"/> Training, certification & qualifications verified by the company (see record of training in P:\Current\Safety\Training) <input checked="" type="checkbox"/> OFA Level 1 <input checked="" type="checkbox"/> Class 5 Drivers License <input checked="" type="checkbox"/> Electrofishing <input checked="" type="checkbox"/> Swift Water Rescue <input checked="" type="checkbox"/> WHMIS <input type="checkbox"/> RPAS Pilot _____ (level)	<input checked="" type="checkbox"/> Section hazards and safe work procedures related to work tasks/processes (Check those reviewed)								
	<table border="1"> <tbody> <tr> <td><input checked="" type="checkbox"/> Electrofishing</td> <td><input checked="" type="checkbox"/> Working in remote locations</td> </tr> <tr> <td><input checked="" type="checkbox"/> Driving</td> <td><input checked="" type="checkbox"/> Working alone or in isolation</td> </tr> <tr> <td><input type="checkbox"/> Construction</td> <td><input type="checkbox"/> Snorkelling</td> </tr> <tr> <td><input type="checkbox"/> Remotely piloted aircraft</td> <td></td> </tr> </tbody> </table>	<input checked="" type="checkbox"/> Electrofishing	<input checked="" type="checkbox"/> Working in remote locations	<input checked="" type="checkbox"/> Driving	<input checked="" type="checkbox"/> Working alone or in isolation	<input type="checkbox"/> Construction	<input type="checkbox"/> Snorkelling	<input type="checkbox"/> Remotely piloted aircraft	
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Signature of Employee / Contractor

[Signature]

Signature of Supervisor / Trainer

[Signature]